24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 3 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	EC IDENTIFICATION NUMBER ▼			
United We Can	C00523621			
Check if 24-hour report 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y			
	Public Distribution/Dissemination			
SEIU Florida State Council				
Mailing Address 14645 NW 77th Ave Amount				
Suite 201	70.00			
City State Zip Code Hialeah FL 33014 Transact	72.22 tion ID : D367678			
Date of I	Disbursement or Obligation			
Purpose of Expenditure Canvassing Services Category/ Type 001 10				
Name of Federal Candidate X Support Office Sought:	House District:			
CLINTON, HILLARY RODHAM, , ,	Senate State:			
Calendar Year-To-Date Per Election for Office Sought Bar 192280.67 Disbursement F 2016	., .,			
Othe	er (specify) -			
Full Name of Payee SEIU Florida State Council Date of I				
Mailing Address 14645 NW 77th Ave				
Suite 201				
City State Zip Code	433.29			
	on ID : D367679 Disbursement or Obligation			
Canvassing Services Category/ Type Oo1 10				
Name of Federal Candidate Support Office Sought:	House District:			
TRUMP, DONALD J, , ,	Senate State:			
Calendar Year-To-Date Per Election for Office Sought Disbursement F 2016	,			
United States of the Country of the	er (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	505.51			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures	7 1 7 1 7			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
[Electronically Filed] Date 10	03 / 2016			
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
United We Can		C C00523621
Check if 24-hour report 48-hour report	New report Amends report file	ed on Man / Dab / Yayayay
Full Name of Payee Ardleigh Group		Date of Public Distribution/Dissemination
		10 01 Y 2016
Mailing Address PO Box 12182		Amount
City Sta	te Zip Code	7939.50
Washington Do	C 20006	Transaction ID : D367674 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing Services	Category/ Type 001	10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	🗶 Support Offi	ce Sought: House District:
CLINTON, HILLARY RODHAM, , ,	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	8192280.67 Disl	bursement For: Primary General 6 Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Ardleigh Group		10 01 2016
Mailing Address PO Box 12182		Amount
City Sta	ate Zip Code	51605.75
Washington D	C 20006	Transaction ID : D367675 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing Services	Category/ Type 001	10 01 / 2016
Name of Federal Candidate	Support Offi	ice Sought: House District:
TRUMP, DONALD J, , ,	X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	8192280.67 Dis 20°	bursement For: Primary General Other (specify) General
(a) SUBTOTAL of Itemized Independent Expenditures		59545.25
(4) 002 10112 01 1011201 11127	F	33070.20
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent exwith, or at the request or suggestion of, any candidate or party committee) any political party committee or its agen	authorized committee or agent of eith	· · · · · · · · · · · · · · · · · · ·
Hudson, Gerald, , ,	[Electronically Filed] Date	10 03 / 2016
dignature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	LIVI LXI LIVI	51101120		PAGE 3 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC I	IDENTIFICATION NUMBER ▼
United We Can			С	C00523621
Check if 24-hour report X 48-hour report	X New re	eport Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee Organize Now Inc			M = M	lic Distribution/Dissemination
Mailing Address 134 E Colonial Dr			Amount	01 2016
City	State	Zip Code		18.05
Orlando	FL	32801		ID: D367676 oursement or Obligation
Purpose of Expenditure Canvassing Services		Category/ Type 001	M 10	/ 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		✗ Support	Office Sought:	House District:
CLINTON, HILLARY RODHAM, , ,		Oppose	✗ President	Senate State:
Calendar Year-To-Date Per Election for Office Sought		8192280.67	Disbursement For: 2016 Other (s	Primary X General specify) ▶
Full Name of Payee			Date of Pub	lic Distribution/Dissemination
Organize Now Inc			10	01 2016
Mailing Address 134 E Colonial Dr			Amount	
City	State	Zip Code		108.32
Orlando	FL	32801	Transaction Date of Disk	ID: D367677 oursement or Obligation
Purpose of Expenditure Canvassing Services		Category/ Type 001	10 ^M	01 / 2016
Name of Federal Candidate		Support	Office Sought:	House District:
TRUMP, DONALD J, , ,		x Oppose	x President	Senate State:
Calendar Year-To-Date Per Election for Office Sought		8192280.67	Disbursement For: 2016 Other (s	Primary X General specify) ▶
(a) SUBTOTAL of Itemized Independent Expendent	diturae			120 27
(a) SOBTOTAL OF ROTHERON INDEPENDENT EXPEND	nturos			126.37
(b) SUBTOTAL of Unitemized Independent Exp	enditures		·· •	
(c) TOTAL Independent Expenditures			>	60177.13
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee o	ndidate or authorize			
Hudson, Gerald, , ,	[Electro	onically Filed] Date	e 10 03	2016
Signature				